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March 4, 2002

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TELECOPY TO: BOX RCE  
COMMISSIONER FOR PATENTS  
GROUP 2834

FAX NUMBER: 703-872-9318

FROM: JOHN P. O'BANION

RE: SER. NO.: 09/677,288  
GROUP: 2834  
EXAMINER: GONZALEZ, J.

FAX COPY RECEIVED

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TECHNOLOGY CENTER 2800

MESSAGE: THE FOLLOWING PAPERS ARE ENCLOSED:

1. REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL (1 PAGE);
2. PETITION FOR EXTENSION OF TIME (1 PAGE);
3. AMENDMENT (PAGES 1-16)

☒ Original will not follow  
☐ Original will follow by:

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PTO/SB/30 (10/2001)

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#10/RCE  
Hawkins  
+3/6/02**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**Address to:  
Commissioner for Patents  
Box RCE  
Washington, DC 20231

Application Number	09/677,288
Filing Date	OCTOBER 2, 2000
First Named Inventor	ANDREW A. FRANK
Art Unit	2834
Examiner Name	GONZALEZ, J.
Attorney Docket Number	UC98-194-2US

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application  
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8,

1. **Submission required under 37 CFR §1.114**a. ☐ Previously submittedi. ☐ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on \_\_\_\_\_  
(Any unentered amendment(s) referred to above will be entered).ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_iii. ☐ Other \_\_\_\_\_b. ☒ Enclosedi. ☒ Amendment/Replyiii. ☐

Information Disclosure Statement (IDS)

ii. ☐ Affidavit(s)/Declaration(s)iv. ☐

Other \_\_\_\_\_

2. **Miscellaneous**a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of \_\_\_\_\_ months (Period of suspension shall not exceed 3 months; Fee under 37 CFR §1.17(l) required)b. ☐ Other \_\_\_\_\_3. **Fees** The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 07-1137i. ☒ RCE fee required under 37 CFR §1.17(e)ii. ☐ Extension of time fee (37 CFR §§1.136 and 1.17)iii. ☐ Other \_\_\_\_\_b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosedc. ☐ Payment by credit card (Form PTO-2038 enclosed)**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print / Type) John P. O'Banion

Signature \_\_\_\_\_

Registration No. (Attorney / Agent) 33,201

Date March 4, 2002

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark

Name (Print / Type)

Signature \_\_\_\_\_

Date \_\_\_\_\_

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**CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)**Applicant(s): **ANDREW A. FRANK**

Docket No.

**UC98-194-2US**Serial No.  
**09/677,288**Filing Date  
**OCTOBER 2, 2000**Examiner  
**GONZALEZ, J.**Group Art Unit  
**2834**Invention: **CONTROL METHOD AND APPARATUS FOR INTERNAL COMBUSTION ENGINE ELECTRIC HYBRID VEHICLES**I hereby certify that this **REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL**  
(Identify type of correspondence)is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. **703-872-9318**)on **MARCH 4, 2002**  
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**JOHN P. O'BANION**

(Typed or Printed Name of Person Signing Certificate)

(Signature)

Note: Each paper must have its own certificate of mailing.

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

**RCE Filed 3/4/02**

**09/677288**

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE <input type="checkbox"/>		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=
X42=		OR	X84=
+140=		OR	+280=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

## CLAIMS AS AMENDED - PART II

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**
Independent	*	Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

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+140=		OR	+280=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 9, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.